## Case 20-63291-pmb Doc 1 Filed 02/25/20 Entered 02/25/20 15:10:37 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Destine First name Shavonne Middle name Robinson Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2950	

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Debtor 1 Destine Shavonne Robinson

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		3175 Mills Creek Cir Unit 3006 Scottdale, GA 30079				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		DeKalb				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Destine Shavonne Robinson

Case number (if known)

Bankruptcy Code you are choosing to file under    Chapter 7			se	Bankruptcy Cas	Your B	rt 2: Tell the Court About	Part				
Chapter 7 Chapter 11 Chapter 12 Chapter 13    Will pay the fee   I will pay the entire fee when I file my petition. Please check with the clerk's of about how you may pay. Typically, if you are paying the fee yourself, your may pay order. If your attorney is submitting your payment on your behalf, your attorney in a pre-printed address.   I need to pay the fee in installments. If you choose this option, sign and attach The Filing Fee in Installments (Official Form 103A)   I request that my fee be waived (You may request this option only if you are filip but is not required to, waive your fee, and may do so only if your income is less the applies to your family size and you are unable to pay the fee in installments). If ye the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and I not filing this case with the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and I not filing this case with source of the payment of the payme	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.										
Chapter 12	■ Chapter 7										
Chapter 12											
Chapter 13				hapter 12	□с						
I will pay the entire fee when I file my petition. Please check with the clerk's of about how you may pay. Typically, if you are paying the fee yourself, you may pay order. If your attorney is submitting your payment on your behalf, your attorney in a pre-printed address.   I need to pay the fee in installments. If you choose this option, sign and attach The Filing Fee in Installments (Official Form 103A).   I request that my fee be waived (You may request this option only if you are fill but is not required to, waive your fee, and may do so only if your income is less the applies to your family size and you are unable to pay the fee in installments.) If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the I was applies to your family size and you are unable to pay the fee in installments.) If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and I was applies to your family size and you are unable to pay the fee in installments.) If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and I was applies to your family size and you are unable to pay the fee in installments.) If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and I was applies to your family size and you are unable to pay the fee in installments. If you then Application only if you are filing the case was applies to your family size and your are unable to pay the fee in installments. If you have your independent on the fee in installments. If you have your and may do so only if your income is less that applies the Application on the fee in installments. If you have your fee, and may do so only if your income is less that applies the Application on the fee in installments. If you are paying the fee in install				hapter 13	□с						
about how you may pay. Typically, if you are paying the fee yourself, you may pa order. If your attorney is submitting your payment on your behalf, your attorney in a pre-printed address.    need to pay the fee in installments. If you choose this option, sign and attach The Filling Fee in Installments (Official Form 103A).   request that my fee be waived (You may request this option only if you are filling but is not required to, waive your fee, and may do so only if your income is less the applies to your family size and you are unable to pay the fee in installments). If you have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and the Ap				·							
The Filing Fee in Installments (Official Form 103A).    Trequest that my fee be waived (You may request this option only if you refilibut is not required to, waive your fee, and may do so only if your income is less that applies to your family size and you are unable to pay the fee in installments). If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7	ay with cash, cashier's check, or money	if you are paying the fee yours	u may pay. Typically attorney is submittin	about how you order. If your a		How you will pay the fee	8.				
I request that my fee be waived (You may request this option only if you are filibut is not required to, waive your fee, and may do so only if your income is less the applies to your family size and you are unable to pay the fee in installments). If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Appli	the Application for Individuals to Pay										
but is not required to, waive your fee, and may do so only if your income is less the applies to your family size and you are unable to pay the fee in installments). If you the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and the Applic	ing for Chapter 7. By law, a judge may	,	,	ŭ	п						
bankruptcy within the last 8 years?  District When Case District When Case District When Case District When Case  No Case pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relation District When Case  Debtor Relation District When Case  Debtor Relation District When Case	than 150% of the official poverty line that you choose this option, you must fill out	e, and may do so only if your in are unable to pay the fee in ins	ired to, waive your for family size and yo	but is not requapplies to you	_						
District When Case  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relation District When Case  Debtor When Case  Debtor Case  The provided Head of the provided Head					_	bankruptcy within the	ba				
District When Case  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relation District When Case Debtor Relation District When Case Destrict District When Case Destrict District When Case Destrict District District District Destrict District District Destrict Destrict District Destrict District Destrict Des	se number	When		District							
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor Debtor Debtor Relati District When Case Debtor Case Debtor Relati District When Case One	se number	When		District							
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor Debtor Debtor No. Go to line 12.	se number	When		District							
filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor Debtor No. Go to line 12.				0	■ No		10.				
District				es.	□ Ye	filed by a spouse who is not filing this case with you, or by a business partner, or by an					
Debtor Relation District When Case  11. Do you rent your No. Go to line 12.	tionship to you			Debtor							
District When Case  11. Do you rent your  No. Go to line 12.	e number, if known	When		District							
11. Do you rent your No. Go to line 12.	tionship to you			Debtor							
	e number, if known	When		District							
			ne 12.	o. Go to lir	□No		11.				
residence?  ■ Yes. Has your landlord obtained an eviction judgment against you?		n eviction judgment against yo	ur landlord obtained	es. Has you	■ Ye	residence?					
No. Go to line 12.			No. Go to line 12.								
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against</i> bankruptcy petition.	You (Form 101A) and file it with this	ntement About an Eviction Jud		_							

Debtor 1 Destine Shavonne Robinson

Case number (if known)

Par	Report About Any Bu	sinesses `	You Owi	n as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
	•				ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				•	(as defined in 11 U.S.C. § 101(6))
				None of the above	
Par	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadlines operation in 11 U.S  No.  No.  Yes.	s. If you in s, cash-f.C. 1116 I am I am Code I am I do r I am I choo	ndicate that you are a low statement, and fe (1)(B).  not filing under Chapter 1 filing under Chapter 1 not choose to proceed filing under Chapter 1 pose to proceed under	small business debtor, you must attach your most recent balance sheet, statement of ideral income tax return or if any of these documents do not exist, follow the procedure ser 11.  1, but I am NOT a small business debtor according to the definition in the Bankruptcy  1, I am a small business debtor according to the definition in the Bankruptcy Code, and a under Subchapter V of Chapter 11.  1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.  1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	■ No. □ Yes.	If imme	the hazard?	
	immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			, why is it needed? s the property?	Number, Street, City, State & Zip Code

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Debtor 1 Destine Shavonne Robinson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

П		ca		

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Destine Shavonne Robinson

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Case number (if known)

Part	6: Answer These Questi	ons for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily constinuity individual primarily for a personal		defined in 11 U.S.C. § 101(8) as "incurred by an			
			□ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		ness debts? Business debts are de ent or through the operation of the l				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consumer debts or busi	iness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		rou estimate that after any exempt p ble to distribute to unsecured credit	property is excluded and administrative expenses ors?			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		□ 5001-10,000	<u> </u>			
		☐ 100-19 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	\$0 - \$1		□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion			
	be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		□ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	•	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 □ \$100,000,001 - \$500 million □ More than \$50 billion				
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare	e under penalty of perjury that the in	formation provided is true and correct.			
			•	, ,	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupto and 3571	understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a ankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571.					
		Destine	ine Shavonne Robinson Shavonne Robinson e of Debtor 1	Signature of De	ebtor 2			
		Executed	on <b>February 25, 2020</b>	Executed on				
	MM / DD / YYYY   MM / DD / YYYY							

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Debtor 1 **Destine Shavonne Robinson** 

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Thomas	s Reichard, GA Bar No.	Date	February 25, 2020
Signature of	Attorney for Debtor		MM / DD / YYYY
Thomas R	eichard, GA Bar No. 150822		
Clark & W	ashington, P.C.		
	neast Expressway		
Building 3 Atlanta, G	A 30341		
Number, Street,	City, State & ZIP Code		
Contact phone	770-488-9338	Email address	cworders@cw13.com
GA			
Rar number & S	tate		

## 

Fill ir	this inforn	nation to identify your	case:					
Debto		Destine Shavonr						
DCDI	)	First Name	Middle Name	ı	_ast Name			
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	ı	_ast Name			
		nkruptcy Court for the:	NORTHERN DISTRICT			IVISION		
		apie, courtier are:						
(if knov	number						_	eck if this is an ended filing
		rm 107	Affairs for Indiv	iduale	Eiling for B	ankruntov		4/4
			Affairs for Individue. If two married people					4/1
inforn	nation. If m er (if knowr	ore space is needed, n). Answer every ques	attach a separate sheet to	o this for	m. On the top of an			
1. V	Vhat is you	r current marital statu	s?					
	☐ Married							
Ī	Not mar	ried						
2. C	Ouring the la	ast 3 years, have you	lived anywhere other thai	n where y	ou live now?			
Г	J No		·	•				
Ī		t all of the places you li	ved in the last 3 years. Do	not includ	e where you live nov	V.		
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ac	ddress:		Dates Debtor 2 lived there
	215 Piedm Apt 1709 Atlanta, G	ont Ave NE A 30308	From-To: <b>12/2015-09/2</b>	2019	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
states I	and territori  ■ No □ Yes. Ma	es include Arizona, Cal	er live with a spouse or leifornia, Idaho, Louisiana, Needule H: Your Codebtors (e	levada, Ne	ew Mexico, Puerto R			
Part 2	2 Explai	n the Sources of You	Income					
F	ill in the tota	al amount of income you	aployment or from operat a received from all jobs and have income that you rece	d all busine	esses, including part	-time activities.	s calend	ar years?
	□ No							
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	es income are deductions and asions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)

Official Form 107

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Debtor 1 Destine Shavonne Robinson

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
		1 of currei iled for bar	nt year until ikruptcy:	■ Wages, commissions, bonuses, tips	\$11,002.78	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
	last calen nuary 1 to	dar year: December	31, 2019 )	■ Wages, commissions, bonuses, tips	\$54,743.15	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$32,908.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
	■ No	source and t	-	me from each source separat	tely. Do not include income t	hat you listed in line	<b>;</b> 4.	
				5.1.		514		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pa	vments You	Made Before You Filed for I	,			
6.	Are either No.	Neither Deindividual puring the No.	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below e paid that cr not include	responsible to an attorney for the consumer septor 2 has primarily consumer personal, family, or household the year of the consumer section of the consumer section of the consumer section attorney for the con 4/01/22 and every 3 years section 2 has primarily consumer section 2.	Imer debts. Consumer debt d purpose." d you pay any creditor a tota d a total of \$6,825* or more its for domestic support oblig his bankruptcy case.	ol of \$6,825* or more in one or more payr gations, such as chi	e? ments and th ld support ar	ne total amount you nd alimony. Also, do
	■ Yes.	During the		r both have primarily consure you filed for bankruptcy, did		al of \$600 or more?		
		□ No. ■ Yes	include pay	each creditor to whom you paid ments for domestic support of this bankruptcy case.				
	Creditor'	s Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this p	ayment for

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Debtor 1 Destine Shavonne Robinson

Amount you still owe **Creditor's Name and Address** Was this payment for ... **Dates of payment Total amount** paid

	World Omni Financial Corporation Reg. Agent: C T Corporation System 289 S Culver Street Lawrenceville, GA 30046-4805	12/2019 \$770.00 01/2020 \$770.00	\$1,540.00	\$45,703.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
	Capital One Bank (USA), N.A P.O. Box 60599 City of Industry, CA 91716-0599	12/2019 \$250.00 11/2019 \$250.00	\$500.00	\$7,500.00	☐ Mortgage ☐ Car ■ Credit Card
					☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a general partner; corporations ny managing agent, including one for
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a debt that benefited an
	No				
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for this payment Include creditor's name
			paid	Still OWC	moduce oreator 3 name
9.	within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	cy, were you a party in ar			
	Case title Case number	Nature of the case	Court or agency		Status of the case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	shed, attached, seized, or levied?
	No. Go to line 11.  Yes Fill in the information below				
	Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date	Value of the
				_ 310	property
		Explain what happened			

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Debtor 1 Destine Shavonne Robinson

11.	Within 90 days before you filed for bank accounts or refuse to make a payment b  ■ No □ Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any	amounts from your
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o  ■ No □ Yes		as any of your property in the possession of an a er official?	assignee for the ben	efit of creditors, a
Par	t 5: List Certain Gifts and Contribution	ıs			
13.	Within 2 years before you filed for bankr  ■ No  □ Yes. Fill in the details for each gift.	uptcy, o	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	the any insurance coverage for the loss the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	s			
16.	consulted about seeking bankruptcy or	prepari	id you or anyone else acting on your behalf pay on gar bankruptcy petition? 's, or credit counseling agencies for services require		erty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not N	<b>′</b> ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	CIN Legal Data Services Box 88229 Milwaukee, WI 53288 Clark & Washington, PC		\$70.00 Credit Counseling, Credit Reports, Tax Transcript	02/19/2020	\$70.00

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17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you have the second of	ors or to make payment			or transfer any prope	erty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your build like the properties of your build like the properties of your build like the properties of your building the your b	ousiness or financial after a security (such as	fairs? the granting of a sec			
	Person Who Received Transfer Address Person's relationship to you	Description and property transfe			any property or s received or debts xchange	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pre No Yes. Fill in the details.		ny property to a se	lf-settled tr	rust or similar device	of which you are a
	Name of trust	Description and	value of the proper	rty transfer	red	Date Transfer was made
<b>Par</b> 20.	List of Certain Financial Accounts, In Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market,	cy, were any financial a	ccounts or instrum	ents held i		
	houses, pension funds, cooperatives, asso	ciations, and other fina	incial institutions.			
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
	Wells Fargo Bank, N.A. Charles Scharf, CEO 101 N. Phillips Avenue Sioux Falls, SD 57104	XXXX-xxxx	☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other Check and Saving	i -	1/2020	\$57.00
	Wells Fargo Bank, N.A. Charles Scharf, CEO 101 N. Phillips Avenue Sioux Falls, SD 57104	XXXX-xxxx	☐ Checking ■ Savings ☐ Money Market ☐ Brokerage ☐ Other		1/2020	\$0.00

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Debtor 1 Destine Shavonne Robinson

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, an	y safe deposit box or other deposito	ry for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your home within 1 y	rear before you filed for bankruptcy?	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	19: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any property	you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground	- ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental la	w, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable ι	under or in violation of an environme	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

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Debtor 1	<b>Destine Shavonne Robinson</b>
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26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements a	ind orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
D	City Date ii Aleant Very Davis and a	,		
Par	rt 11: Give Details About Your Business or 0	Connections to Any Business		
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	any (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	ecutive of a corporation		
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation		
	No. None of the above applies. Go to P	art 12.		
	☐ Yes. Check all that apply above and fill		i.	
	Business Name	Describe the nature of the business	Employer Identification number	r
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.
	, , , , , ,	Name of accountant of bookkeeper	Dates business existed	
	<ul><li>institutions, creditors, or other parties.</li><li>No</li><li>Yes. Fill in the details below.</li></ul>			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Par	rt 12: Sign Below			
are t with 18 U	ve read the answers on this <i>Statement of Fine</i> true and correct. I understand that making a far a bankruptcy case can result in fines up to \$J.S.C. §§ 152, 1341, 1519, and 3571.  Destine Shavonne Robinson	false statement, concealing property,	or obtaining money or property by fra	
	stine Shavonne Robinson nature of Debtor 1	Signature of Debtor 2		
Dat	te February 25, 2020	Date		
Did∶ ■ N □ Y		nt of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 10	17)?
	you pay or agree to pay someone who is not No Yes. Name of Person Attach the Bankrup			

### 

		Document	Page 15 of 53		
Fill in this infor	mation to identify your case a	nd this filing:	J		
Debtor 1	Destine Shavonne Rob				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the: NORT	THERN DISTRICT OF GE	ORGIA - ATLANTA DIVISIO	ıN	
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedul	e A/B: Property	V			12/15
	separately list and describe items		an asset fits in more than one	category, list the asset in	
information. If mor Answer every ques		rate sheet to this form. On t	he top of any additional pages		
	Each Residence, Building, Land,				
_	,	st in any residence, building	j, land, or similar property:		
No. Go to Pa	=.				
☐ Yes. Where i	is the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes	ucks, tractors, sport utility ve	micies, motorcycles			
3.1 Make:	Toyota	Who has an interest in t	he property? Check one	Do not deduct secured cl	
Model:	Camry	■ Debtor 1 only		the amount of any secure Creditors Who Have Clair	ims Secured by Property.
Year:	2019	Debtor 2 only		Current value of the	Current value of the
Approxima	- <u> </u>	Debtor 1 and Debtor 2	•	entire property?	portion you own?
Other infor	mation:	At least one of the deb	otors and another		
		Check if this is comm	nunity property	\$30,680.00	\$30,680.00
Examples: Boa  No Yes  Add the dollar	ar value of the portion you owave attached for Part 2. Write	atercraft, fishing vessels, s	nowmobiles, motorcycle acc	entries for	\$30,680.00
Part 3: Describe	Your Personal and Household !!	ams			
	Your Personal and Household It have any legal or equitable in		wina items?		Current value of the
23 you own or	any logal of equitable in	to took in any or the follo			portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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D	ebtor 1	Destine Sha	avonne Robinson Case number (if known)	
6.		<b>old goods and</b> fes: Major appliar	furnishings nces, furniture, linens, china, kitchenware	
	Yes.	Describe		
			2 bdrm,lr,dr,w/d, kitchen	\$2,000.00
			z barm,n,ar,w/a, kitchen	φ2,000.00
	□ No	es: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of phones, cameras, media players, games	collections; electronic devices
			3 tv,x-box,playstation 3, games	\$300.00
3.	Example ■ No		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin ions, memorabilia, collectibles	, or baseball card collections;
9.	Example  No	ent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
10.	■ No		es, shotguns, ammunition, and related equipment	
	. <b>Clothe</b> : <i>Examp</i> □ No		lothes, furs, leather coats, designer wear, shoes, accessories	
	Yes.	Describe		
			Clothing	\$1,000.00
12.	□ No		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  Jewelry	gold, silver
	Examp ■ No	rm animals ples: Dogs, cats, Describe	birds, horses	
14.	■ No		nd household items you did not already list, including any health aids you did not list	
	☐ Yes.	Give specific inf	formation	
15	5. <b>Add t</b>	the dollar value	of all of your entries from Part 3, including any entries for pages you have attached	t2 c00 00

Official Form 106A/B Schedule A/B: Property page 2

for Part 3. Write that number here .....

\$3,600.00

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Document Page 17 of 53 Debtor 1 Case number (if known) **Destine Shavonne Robinson** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash \$0.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Navy Federal Credit Union** \$1,000.00 17.1. Checking **Navy Federal Credit Union** \$0.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$95.00 401(k) Through job 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

page 3

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Debtor 1	Destine Shavor	nne Robinson		9	Case number (if known)	
26 U. ■ No	S.C. §§ 530(b)(1), 529,	A(b), and 529(b)(1).				
☐ Ye	s Institu	ition name and descrip	otion. Separately file	the records	of any interests.11 U.S.C. § 521(c):	
25. <b>Trus</b> ■ No		interests in propert	y (other than anythi	ng listed in	line 1), and rights or powers exerc	sable for your benefit
	s. Give specific inform					
	nts, copyrights, trade mples: Internet domain					
	s. Give specific inform	ation about them				
Exai ■ No	)	s, exclusive licenses, c		on holdings,	liquor licenses, professional licenses	
	s. Give specific inform					
Money o	or property owed to yo	ou?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28. <b>Tax</b> ı	refunds owed to you					
■ No						
∐ Ye	s. Give specific informa	ation about them, inclu	iding whether you alr	eady filed th	ne returns and the tax years	
	•	p sum alimony, spous	al support, child supp	oort, mainte	nance, divorce settlement, property se	ttlement
	s. Give specific informa	ation				
	benefits; unpaid			nefits, sick p	pay, vacation pay, workers' compensa	ation, Social Security
	s. Give specific inform	ation				
			alth savings account	(HSA); cred	dit, homeowner's, or renter's insurance	
■ Ye	s. Name the insurance		cy and list its value.			
		Company name:			Beneficiary:	Surrender or refund value:
		Term Life Insura	nce Policy throug	ıh job	Tanjela McCorkle, Zai'ja Bass, Broderick Godbee Jr	\$0.00
		State Farm - Teri	m Life Insurance l	Policy	Tanjela McCorkle, Zai'ja	
					Bass, Broderick Godbee Jr	\$0.00
If yo	interest in property thu are the beneficiary of eone has died.				olicy, or are currently entitled to receive	e property because

■ No

 $\hfill \square$  Yes. Give specific information..

Debtor	Case 20-63291-pmb Doc 1 Filed 02/25/20 Ent Document Page 1 Destine Shavonne Robinson	ered 02/25/20 15:10:37 9 of 53 Case number (if known)	Desc Main
	aims against third parties, whether or not you have filed a lawsuit or made a camples: Accidents, employment disputes, insurance claims, or rights to sue		
■ No			
_	/es. Describe each claim		
	ner contingent and unliquidated claims of every nature, including countercl	aims of the debtor and rights to se	t off claims
■ No	No /es. Describe each claim		
35. <b>Any</b>	y financial assets you did not already list		
■ No	No		
☐ Ye	es. Give specific information		
	dd the dollar value of all of your entries from Part 4, including any entries for Part 4. Write that number here		\$1,095.00
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.	
•	you own or have any legal or equitable interest in any business-related property?  o. Go to Part 6.		
_	es. Go to line 38.		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	Interest In.	
5			
	you own or have any legal or equitable interest in any farm- or commercial	fishing-related property?	
_	No. Go to Part 7.		
<u></u> Ц	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List About	ove	
	you have other property of any kind you did not already list?  kamples: Season tickets, country club membership		
■ No	No		
□ Ye	es. Give specific information		
54. <b>Ac</b>	dd the dollar value of all of your entries from Part 7. Write that number here	_	\$0.00
Part 8:	List the Totals of Each Part of this Form		
55 <b>D</b> o	art 1: Total real estate, line 2		¢0.00
	art 2: Total vehicles, line 5 \$30,680		\$0.00
JJ. 1 4	— — — — — — — — — — — — — — — — — — —	<u> </u>	

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$30,680.00		
57.	Part 3: Total personal and household items, line 15		\$3,600.00		
58.	Part 4: Total financial assets, line 36		\$1,095.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$35,375.00	Copy personal property total	sal \$35,375.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$35,375.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:		
Debtor 1	Destine Shavonn	e Robinson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA	A DIVISION
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B			
\$30,680.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(3)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$2,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(5)
		100% of fair market value, up to any applicable statutory limit	
	\$300.00 \$1,000.00	\$300.00 \$1,000.00	\$30,680.00  \$30,680.00  \$30,680.00  \$2,000.00  \$2,000.00  \$2,000.00  \$2,000.00  \$300.00  \$300.00  \$300.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00  \$300.00

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Debtor	1 <b>De</b>	stine Shavonne Robinson			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1		\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(6)
	10 110111	00/1044/10/7/2011			100% of fair market value, up to any applicable statutory limit	
		g: Navy Federal Credit Union Schedule A/B: 17.1	\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(6)
LIII	ie irom	Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
		: Navy Federal Credit Union	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(6)
LIII	Line from <i>Schedule A/B</i> : <b>17.2</b>				100% of fair market value, up to any applicable statutory limit	
		Through job Schedule A/B: <b>21.1</b>	\$95.00		\$95.00	O.C.G.A. § 44-13-100(a)(2.1)(D)
LIII	ie irom	Scredule A/D. Z1.1			100% of fair market value, up to any applicable statutory limit	44-13-100(a)(2.1)(b)
Te jol		e Insurance Policy through	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(9)
Be Ba	enefici ass, Bı	ary: Tanjela McCorkle, Zai'ja roderick Godbee Jr Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
		rm - Term Life Insurance	\$0.00		\$0.00	O.C.G.A. § 44-13-100(a)(9)
Be Ba	Policy Beneficiary: Tanjela McCorkle, Zai'ja Bass, Broderick Godbee Jr Line from Schedule A/B: 31.2				100% of fair market value, up to any applicable statutory limit	
		claiming a homestead exemption of adjustment on 4/01/22 and every 3			iled on or after the date of adjustmer	nt.)
	No					
	Yes.	Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?
		No				
		Yes				

			Document	Page 22	of 53	<u></u>	
Fill i	n this information	n to identify yοι	ır case:				
Debt	tor 1	estine Shavon	ne Robinson				
		rst Name	Middle Name	Last Name			
Debt (Spou		rst Name	Middle Name	Last Name			
Unite	ed States Bankru	otcy Court for the:	NORTHERN DISTRICT OF GE	EORGIA - ATL	ANTA DIVISION		
	·	,					
Case (if kno	e number wn)						c if this is an ded filing
	cial Form 10 nedule D:		Who Have Claims	Secured	I by Propert	у	12/15
is nee numb 1. Do [	eded, copy the Add er (if known). any creditors have No. Check this	itional Page, fill it of claims secured by	his form to the court with your other	to this form. Or	the top of any addition	nal pages, write your na	
Part	1: List All Se	cured Claims					
for ea	ach claim. If more the as possible, list the	nan one creditor has claims in alphabeti	more than one secured claim, list the cre s a particular claim, list the other creditors cal order according to the creditor's nam	s in Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	World Omni F Corporation	inancial	Describe the property that secures to	the claim:	\$45,703.00	\$30,680.00	\$15,023.00
	Creditor's Name Reg. Agent: C Corporation S 289 S Culver S Lawrenceville 30046-4805	System Street	As of the date you file, the claim is: apply.  Contingent				
	Number, Street, City,	State & Zip Code	☐ Unliquidated☐ Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that apply.				
_	ebtor 1 only ebtor 2 only		An agreement you made (such as car loan)	mortgage or sec	ured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt		btors and another	☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	chanic's lien)			
Date	debt was incurred	Opened 10/19 Last Active 1/17/20	Last 4 digits of account numl	ber 5009			
اد ۵	d the dellar value	of vour ontrine in C	Column A on this name Write that	har hare:	¢45 70	2 00	
If th		of your form, add	column A on this page. Write that num the dollar value totals from all pages.		\$45,70 \$45,70		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	Page 23 of	53	-	
Fill i	n this informa	ation to identify your o	case:				
Debt	tor 1	Destine Shavonne	- Rohinson				
200.		First Name	Middle Name	Last Name			
Debt		E: AN	MC I II N				
(Spou	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF G	EORGIA - ATLANT	A DIVISION		
Case	e number						
(if kno						☐ Check	if this is an
						amend	ed filing
<b>√</b> ττ:	aial Farm	400E/E					
	cial Form		lha Haya Haaaay	d Claima			40/4E
			ho Have Unsecured Part 1 for creditors with PRIORI				12/15
eft. A	ttach the Contii	nuation Page to this page	ured by Property. If more space is e. If you have no information to ro				
		s have priority unsecured					
_	☐ No. Go to Par	· ·	a olalino againot you :				
	Yes.						
io p	dentify what type possible, list the o	e of claim it is. If a claim ha claims in alphabetical orde	s. If a creditor has more than one priss both priority and nonpriority amoust according to the creditor's name. Inticular claim, list the other creditors	ints, list that claim here If you have more than t	and show both priority a	and nonpriority amount	s. As much as
(	For an explanation	on of each type of claim, s	ee the instructions for this form in the	ne instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1	Georgia I	Department of Reve	enue Last 4 digits of acco	unt number	\$700.00	\$700.00	\$0.00
	Priority Cred		WI (I I -I		<del>_</del>	· ·	· -
	-	nce Division ankruptcy	When was the debt i	ncurrea?		_	
		ntury BLVD NE Suite	e 9100				
		GA 30345-3202	A section later as the				
		eet City State Zip Code the debt? Check one.	_	le, the claim is: Check	all that apply		
	■ Debtor 1 onl		☐ Contingent				
			☐ Unliquidated				
	Debtor 2 onl	-	Disputed	nosoured eleim.			
	Debtor 1 and	· ·	Type of PRIORITY ur				
		of the debtors and anothe		•			
		s claim is for a commun		other debts you owe th			
		bject to offset?		r personal injury while	you were intoxicated		
	■ No □ Yes		Other. Specify	2017 Tax Yr.			
			2	UIT TAX TT.			

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Debtor 1 Destine Shavonne Robinson	Case number (if known)	
2.2 IRS	Last 4 digits of account number \$0.00 \$	50.00 \$0.00
Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D Room 400	When was the debt incurred?	
Atlanta, GA 30308		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Domestic support obligations	
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
■ No	☐ Other. Specify	
Yes	Notice Only	
unsecured claim, list the creditor separately for each	e alphabetical order of the creditor who holds each claim. If a creditor has more tha claim. For each claim listed, identify what type of claim it is. Do not list claims already incorrected recreditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
		Total claim
4.1 Aetna Life Insurance Company	Last 4 digits of account number	\$263.00
Nonpriority Creditor's Name P.O. Box 981106 El Paso, TX 79998	When was the debt incurred? 12/2019	-
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
$\square$ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	Other. Specify Insurance	=

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Debtor 1 Destine Shavonne Robinson 4.2 \$10,581.00 Capital One Last 4 digits of account number 0430 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/12 Last Active Po Box 30285 When was the debt incurred? 01/20 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Multiple Credit Card Accounts / Saks Fifth Other. Specify ☐ Yes 4.3 **Cash Net USA** Last 4 digits of account number \$2,131.27 Nonpriority Creditor's Name 175 West Jackson 2019 When was the debt incurred? **Suite 1000** Chicago, IL 60604 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Account 4.4 **Comenity Bank** 0080 Last 4 digits of account number \$4,795.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/18 Last Active 02/20 Po Box 182125 When was the debt incurred? Columbus, OH 43218 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Multiple Charge Account/Express, Victoria ☐ Yes ■ Other. Specify Secret, New York

Page 26 of 53 Case number (if known) Document Debtor 1 Destine Shavonne Robinson

4.5	Credit One Bank	Last 4 digits of account number	0750	\$2,690.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 10/19 Last Active 01/20	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Multiple Cr	edit Card Accounts	
4.6	I.c. System, Inc	Last 4 digits of account number	3745	\$664.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 64378	When was the debt incurred?	Opened 02/19	
	St. Paul, MN 55164  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	□Yes	Physicians	ollection Attorney Augusta Group Llc/South Fulton Physicians	
4.7	Jefferson Capital Systems, LLC	Last 4 digits of account number	5003	\$1,061.00
	Nonpriority Creditor's Name Attn: Bankruptcy 16 McIeland Road Saint Cloud. MN 56303	When was the debt incurred?	Opened 01/19 Last Active 01/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Tactoring (Wireless	Company Account Verizon	

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Case number (if known)

Debtor 1 Destine Shavonne Robinson 4.8 \$697.00 John C. Martin Orthodontics Last 4 digits of account number Nonpriority Creditor's Name 1728 GA-138 #130 When was the debt incurred? 2018 Conyers, GA 30013 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No **Medical Services** ☐ Yes Other. Specify 4.9 Lead Bank Last 4 digits of account number \$447.00 9192 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/19 Last Active 1/30/20 200 N 3rd St When was the debt incurred? Garden City, MO 64747 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.1 Medical Data Systems (MDS) 7667 \$5,386.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 10/19 Last Active Attn: Bankruptcy Dept 2001 9th Ave Ste 312 When was the debt incurred? 11/18 Vero Beach, FL 32960 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Multiple Collection Attorney Ws Atlanta** ■ Other Specify Medical Center ☐ Yes

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Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes

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Debtor 1 Destine Shavonne Robinson **Peachtree Dermatology Associates** 4.1 Last 4 digits of account number 8649 \$133.61 4 PC Nonpriority Creditor's Name 371 E Paces Ferry Road When was the debt incurred? 09/24/2019 Suite 900 Atlanta, GA 30305 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes **Medical Services** Other. Specify 4.1 Synchrony Bank/Old Navy 8799 \$1.572.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 08/18 Last Active Po Box 965060 When was the debt incurred? 02/20 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.1 **Target Card Services** 7664 \$86.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 673 When was the debt incurred? 09/2019 Minneapolis, MN 55440 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Account

Page 30 of 53 Case number (if known) Document Debtor 1 Destine Shavonne Robinson 4.1 **University Hospital** 1809 \$1,004.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy **Opened 10/13** When was the debt incurred? 1350 Walton Way Agusta, GA 30901 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Attorney 4.1 **USDOE/GLELSI** 8581 \$162,927.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 7/13/10 Last Active Attn: Bankruptcy Po Box 7860 When was the debt incurred? 01/20 Madison, WI 53707 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** 

	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 700.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 700.00
Total	6f.	Student loans	6f.	\$ Total Claim 165,857.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00

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### Debtor 1 Destine Shavonne Robinson

you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 41,783.88 Total Nonpriority. Add lines 6f through 6i. 6j. 207,640.88

Fill in this infor	mation to identify your	case:	···	
Debtor 1	Destine Shavonn	e Robinson		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISION	_
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Progressive Leasing
256 West Data Drive
Draper, UT 84020

State what the contract or lease is for
Bedroom Set - \$265 per month

		Docume	nt Page 33 c	)T 53	
Fill in this	information to identify your				
Debtor 1	Destine Shavonr	e Robinson			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLAN	ITA DIVISION	
Case num	ber				
(if known)					Check if this is an
					amended filing
	I Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
fill it out, a your name	nd number the entries in the and case number (if known	boxes on the left. Attach ). Answer every question	the Additional Page t	o this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes	S				
	hin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include
	Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, lir	
	Name			Schedule E/F,	
				☐ Schedule G, lir	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your ca	ise:				1				
	•	vonne Robinson								
		Voline (Vobilison			_					
	otor 2 use, if filing)				_					
Unit	ed States Bankruptcy Court for the	NORTHERN DISTRIC	CT OF GEORGIA - AT	LANTA	_					
	e number						k if this is			
(If kn	own)					1	n amende	•	a naatnatitiaa	abantar
									g postpetition ollowing date:	
<u>O</u> 1	ficial Form 106l					M	IM / DD/ \	YYYY		
So	chedule I: Your Inco	ome								12/15
sup <sub>l</sub>	s complete and accurate as possolying correct information. If you use. If you are separated and you ch a separate sheet to this form. On the body and be because the body and because the body are because the body and because the body are body as a possible body and because the body are body and because the body are body as a possible body are body as a possible body are body as a possible body are body and body are body as a possible body as a possible body are body as a possible body as a possible body are body as a possible body are body as a possible body as a possible body are body as a possible body are body as a possible body as a possible body are body as a possible body are body as a possible body as a possible body as a possible body are body as a possible body	are married and not filir r spouse is not filing wi	ng jointly, and your s th you, do not includ	spouse i de inforr	s liv natio	ing with on about	you, incl	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor :	2 or non-fi	ling spouse	
	If you have more than one job,	<b>5</b>	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Payment Specialist							
	Include part-time, seasonal, or self-employed work.	Employer's name	Wellstar Health	System	ı, In	С				
	Occupation may include student or homemaker, if it applies.	Employer's address	P.O. Box 742625 Atlanta, GA 303		5					
		How long employed th	nere? Since 4	/2018			_			
Par	t 2: Give Details About Mon	thly Income								
	mate monthly income as of the da	ate you file this form. If y	you have nothing to re	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		embine the information	n for all e	mplo	oyers for	that perso	on on the li	nes below. If	you need
						For Dek	otor 1		btor 2 or ng spouse	
2.	<b>List monthly gross wages, salar</b> deductions). If not paid monthly, or			2.	\$	4	,951.00	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	4,95	51.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

## 

Deb	tor 1	Destine Shavonne Robinson	-	Case	e number ( <i>if known</i> )			
					For Debtor 1		For Debtor 2 or	
	Copy	y line 4 here	4.	\$	4,951.00	\$	-filing spouse N/A	
				· –	.,			_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	801.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_ \$	0.00	\$_	N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	φ_ \$	300.00	\$	N/A N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$—	N/A	_
	5g.	Union dues	5g.	\$-	0.00	\$_	N/A	_
	5h.	Other deductions. Specify: Term Life Ins.	5h.⊣	+ \$		+ \$	N/A	_
		Supplemental Insurance	_	\$	43.00	\$	N/A	=
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	1,167.00	\$	N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,784.00	\$	N/A	_
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		-	-,,	· <u>—</u>		-
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	_
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$_	N/A	_
	8h.	Other monthly income. Specify: Part-Time Job	8h.+	+ \$	500.00	+ \$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	500.00	\$	N/A	4
							=	
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,284.00 + \$		N/A = \$	4,284.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not cify:	depen availat	ole to	pay expenses list		Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines			,		12. \$	4,284.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				Combii monthl	ned y income
		No.						

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify y	our case:								
Debtor 1 Destine Shavonne Robinson						Check if this is:					
Debtor 2		200 Onatolino Nobilison					<ul><li>☐ An amended filing</li><li>☐ A supplement showing postpetition chapter</li></ul>				
	ouse, if filing)							the following date:			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GIATLANTA DIVISION					RGIA -		MM / DD / YYYY				
	se number										
0	fficial Fo	orm 106J				I					
		J: Your						12/1			
info	ormation. If m		eded, atta	If two married people an ch another sheet to this n.							
Par 1.	t 1: Desci	ribe Your House nt case?	ehold								
	■ No. Go to	o line 2.	in a separ	ate household?							
	□ N □ Y	· <del>-</del>	st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of De	ebtor 2.				
2.	Do you hav	e dependents?	□ No								
	Do not list Debtor 1 and Debtor 2.		Yes. Fill out this information for each dependent		Dependent's relation		Dependent's age	Does dependent live with you?			
	Do not state the dependents names.				Son		12	□ No ■ Yes			
								□ No			
					Daughter		15	■ Yes □ No			
								☐ Yes			
								□ No			
2	Do your ov	aanaaa inaluda	_					☐ Yes			
3.	expenses o	penses include of people other t d your depende	han <sub>—</sub>	No Yes							
Par		ate Your Ongoi									
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp							
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses			
(		,									
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$	1,350.00			
	If not include	ded in line 4:									
	4a. Real	estate taxes				4a.	\$	0.00			
	•	erty, homeowner'				4b.		17.00			
				ipkeep expenses		4c.	·	50.00			
5		owner's associa		dominium dues our residence, such as ho	me equity loans	4d. 5	·	0.00			

## 

Deptor 1	Destine Shavonne Robinson	Case num	ber (if known)	
6. Uti	lities:			
6a.		6a.	\$	150.00
6b.		6b.		60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.		6d.		230.00
	Cable/Internet		\$	133.00
7. <b>Fo</b>	od and housekeeping supplies		·	800.00
	ildcare and children's education costs	8.	\$	60.00
	othing, laundry, and dry cleaning	9.		200.00
	rsonal care products and services	10.	· · · · · · · · · · · · · · · · · · ·	198.00
	dical and dental expenses	11.	·	100.00
	Insportation. Include gas, maintenance, bus or train fare.		Ψ	100.00
	not include car payments.	12.	\$	500.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.		· <del></del>	
	not include insurance deducted from your pay or included in lines 4 or 20.			
15	a. Life insurance	15a.	\$	17.00
15l	p. Health insurance	15b.	\$	0.00
150	c. Vehicle insurance	15c.	\$	154.00
150	d. Other insurance. Specify:	15d.	\$	0.00
6. <b>Ta</b> :	<b>kes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
	tallment or lease payments:			
178	a. Car payments for Vehicle 1	17a.	\$	0.00
17l	o. Car payments for Vehicle 2	17b.	\$	0.00
170	c. Other. Specify: <b>Bedroom Set</b>	17c.	\$	265.00
170	d. Other. Specify:	17d.	\$	0.00
3. <b>Yo</b>	ur payments of alimony, maintenance, and support that you did not report as			0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Scho			
	a. Mortgages on other property	20a.		0.00
	p. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.		0.00
	d. Maintenance, repair, and upkeep expenses	20d.	· <u> </u>	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
1. <b>Otl</b>	ner: Specify:	21.	+\$	0.00
2 <b>Ca</b>	Iculate your monthly expenses			
	a. Add lines 4 through 21.		\$	4,284.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	4,204.00
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,284.00
3. <b>Ca</b>	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,284.00
	o. Copy your monthly expenses from line 22c above.	23b.	-\$	4,284.00
-				.,,
230	c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	0.00
24. <b>Do</b> For	The result is your <i>monthly net income</i> .  you expect an increase or decrease in your expenses within the example, do you expect to finish paying for your car loan within the year or do you		year after you file this	year after you file this form?
	cation to the terms of your mortgage?		,,	y
	No.			
	Yes. Explain here:			
	103. LAPIGIT HOLD.			

## 

Fill in this informa	ation to identify your	2250:		
Debtor 1	Destine Shavonne	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	NORTHERN DIS	TRICT OF GEORGIA - ATLANTA DIVISION	
Case number				
(if known)				<ul><li>Check if this is an amended filing</li></ul>
				amended ming
000 : 15	400			
Official Form				_
Statement	of Intentio	n for Indiv	viduals Filing Under Chapte	er 7 12/15
If you are on indivi	dual filing under abo	-to: 7 van must fil	Louis this form if.	
	dual filing under chap claims secured by yo	. •	rout this form ii.	
_	l personal property a		ot expired.	
You must file this f	orm with the court w	ithin 30 days after	you file your bankruptcy petition or by the date so	
on the fo	•	e court extends th	e time for cause. You must also send copies to th	e creditors and lessors you list
If two married peor	ole are filing together	in a joint case, bo	th are equally responsible for supplying correct in	nformation. Both debtors must
	date the form.	iii a joiiii oaoo, bo	are equally respondence to eapprying estreet in	morniation Dom dobtoro maot
Be as complete an	d accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. On	the top of any additional pages,
write you	r name and case nun	nber (if known).	•	
Part 1: List You	r Creditors Who Have	Secured Claims		
1 For any creditors	s that you listed in Pa	ort 1 of Schedule D	: Creditors Who Have Claims Secured by Property	v (Official Form 106D), fill in the
information belo	w.			
Identify the cred	itor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's Wo	rld Omni Financial	Corporation	Common don the property	□No
name:		o.po.ao	<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	L NO
			☐ Retain the property and enter into a	■ Yes
Description of property	2019 Toyota Camry	y 10,000 miles	Reaffirmation Agreement.	
securing debt:			☐ Retain the property and [explain]:	
				_
	r Unexpired Persona		in Schedule G: Executory Contracts and Unexpire	ed Leases (Official Form 106G) fill
in the information	below. Do not list rea	l estate leases. Un	expired leases are leases that are still in effect; the	ne lease period has not yet ended.
You may assume a	n unexpired persona	I property lease if	the trustee does not assume it. 11 U.S.C. § 365(p)	(2).
Describe your une	expired personal prop	perty leases		Will the lease be assumed?
Lessor's name:	Progressive Lo	easing		□ No
20000. 0	i rogrosorro E	Juonig		LI NO
				Yes
Deparintion of land	od Badraarii Ori	¢265		
Description of lease Property:	eu <b>Bearoom Set</b> -	\$265 per month		
Part 3: Sign Bel	OW			
Julia Del	O 14			

Official Form 108

## 

Del	otor 1 _	Destine Shavonne Robinson	Case number (if known)
	•	ty of perjury, I declare that I have indicated t is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal
X	Destin	stine Shavonne Robinson ne Shavonne Robinson ne of Debtor 1	X Signature of Debtor 2
	Date	February 25, 2020	Date

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ation to identify your			
Destine Shavonn	e Robinson		
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
kruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA	A DIVISION
			☐ Check if this is an
			amended filing
	Destine Shavonne First Name	Destine Shavonne Robinson First Name Middle Name  First Name Middle Name	Destine Shavonne Robinson First Name Middle Name Last Name  First Name Middle Name Last Name

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	11: Summarize Your Assets		
			ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	35,375.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	35,375.00
Par	12: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	45,703.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	700.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	207,640.88
	Your total liabilities	\$	254,043.88
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,284.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,284.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nereonal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Destine Shavonne Robinson

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,451.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	700.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	165,857.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	166,557.00

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Fill in this infor	rmation to identify your	case.			
Debtor 1	Destine Shavonn				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	Γ OF GEORGIA - ATL	ANTA DIVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
ou must file the	is form whenever you fi	n connection with a ban	s or amended schedu	ules. Making a false sta	atement, concealing property, or 000, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill o	out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules	s filed with this declarat	tion and
Y Isl Do	stine Shavonne Robi	neon	x		
Destin	ne Shavonne Robinso ure of Debtor 1			re of Debtor 2	
Date	February 25, 2020		Date		

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Fill in this i	nformation to identify your case:					rected in this form and	d in Form
Debtor 1	Destine Shavonne Robinson		122	2A-1Su	pp:		
Debtor 2 (Spouse, if filir			'	■ 1. Th	nere is no presi	umption of abuse	
	tes Bankruptcy Court for the:  NORTHERN DIS GEORGIA - ATLA	TRICT OF ANTA DIVISION	'	а	pplies will be m	o determine if a presunade under <i>Chapter 7</i> cial Form 122A-2).	•
Case numl	per		'	□ 3. Tł	ne Means Test	does not apply now be service but it could a	
O((; ;	I F 400 A . 4			☐ Che	eck if this is a	n amended filing	
	<u>l Form 122A - 1</u> er <b>7 Statement of Your Cu</b> l	rrent Mor	othly Inc	ome	<b>a</b>		12/19
Be as compl attach a sep case numbe	ete and accurate as possible. If two married people arate sheet to this form. Include the line number to vertile (if known). If you believe that you are exempted from the complete and file Statement of Exemple Calculate Your Current Monthly Income	are filing together which the addition om a presumption	r, both are equal all information a of abuse becau	lly respo applies. se you o	onsible for being On the top of ar do not have prin	ny additional pages, wri narily consumer debts o	e is needed, te your name and or because of
	is your marital and filing status? Check one o	nlv					
	ot married. Fill out Column A, lines 2-11.	iny.					
	•	ut both Columns	A and P. lines	2 11			
	arried and your spouse is filing with you. Fill o			2-11.			
	arried and your spouse is NOT filing with you.	-	-		^ D :: 0	. 4.4	
	Living in the same household and are not leg						
	<b>Living separately or are legally separated.</b> Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally separated	l under nonban	kruptcy	law that applie	es or that you and you	
101(10A) the 6 moi	e average monthly income that you received from all . For example, if you are filing on September 15, the 6-n hths, add the income for all 6 months and divide the tota own the same rental property, put the income from that	nonth period would I by 6. Fill in the res	be March 1 throusult. Do not include	ugh Aug de any ir	ust 31. If the amo	unt of your monthly incor ore than once. For examp	ne varied during ole, if both
				Colum		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, Il deductions).	and commission	ons (before all	\$	4,951.00	\$	
3. Alimo	ony and maintenance payments. Do not include nn B is filled in.	payments from	a spouse if	\$	0.00	\$	
of yo from a and re	nounts from any source which are regularly purely or your dependents, including child support an unmarried partner, members of your househol commates. Include regular contributions from a specific property on the payments you listed on line 3.	. Include regular d, your depender	contributions nts, parents,	\$	0.00	\$	
	ncome from operating a business, profession,	or farm					
		Deb	tor 1				
Gross	receipts (before all deductions)	\$ 0.00					
Ordin	ary and necessary operating expenses	-\$ 0.00					
Net m	onthly income from a business, profession, or fail	rm \$ <u>0.00</u>	Copy here ->	\$	0.00	\$	
6. Net ir	ncome from rental and other real property	Deb	tor 1				
Gross	receipts (before all deductions)	\$ 0.00					
Ordin	ary and necessary operating expenses	-\$ 0.00					
Net m	nonthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. Intere	est, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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		Document	Page 44 of 53	
1	Destine Shavonne Robinson		Case number (if known)	

				Column A Debtor 1		Column B Debtor 2 or non-filing sp	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amounthe Social Security Act. Instead, list it here:		ınder				
	For you \$ For your spouse \$	0.00	_				
	For your spouse \$		_				
	Pension or retirement income. Do not include any and benefit under the Social Security Act. Also, except as so not include any compensation, pension, pay, annuity, of United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chap	stated in the next sentence or allowance paid by the ty, combat-related injury of the ses. If you received any repay only to the extent that u would otherwise be entitle for 61 of that title.	e, do or etired t it tled	\$	0.00	\$	
	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disabilit disability, or death of a member of the uniformed service sources on a separate page and put the total below.	Security Act; payments manity, or international or nuity, or allowance paid b ty, combat-related injury o	y the				
	Part-Time Job		_	\$	500.00	\$	
			_	\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		S	5,451.00	+		= \$ 5,451.00
							Total current monthly income
Part	2: Determine Whether the Means Test Applies t	o You					
12.	Calculate your current monthly income for the year	Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сор	y line 11 h	oro->	
	Tea. Copy your total our our months in our months in our	11				616-2	\$5,451.00_
	Multiply by 12 (the number of months in a year)	''				616-2	\$ 5,451.00 <b>x</b> 12
						12b.	
	Multiply by 12 (the number of months in a year)	e form					x 12
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of th	e form					x 12
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of th  Calculate the median family income that applies to	e form  you. Follow these steps:					x 12
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of th  Calculate the median family income that applies to  Fill in the state in which you live.	e form  you. Follow these steps:  GA  3 of household. online using the link spec				12b. 13.	x 12
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of th  Calculate the median family income that applies to  Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size  To find a list of applicable median income amounts, go	e form  you. Follow these steps:  GA  3 of household. online using the link spec				12b. 13.	x 12 \$ 65,412.00
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of th  Calculate the median family income that applies to  Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size  To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	e form  you. Follow these steps:  GA  3 of household. online using the link spectruptcy clerk's office. on the top of page 1, chec	cified	in the separ	ate instruct	12b. 13. ions	x 12  \$ 65,412.00  \$ 72,426.00
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the  Calculate the median family income that applies to  Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size  To find a list of applicable median income amounts, go for this form. This list may also be available at the bank  How do the lines compare?  14a. Line 12b is less than or equal to line 13. Compared to the lines to the	e form  you. Follow these steps:  GA  3  of household. online using the link spectruptcy clerk's office.  on the top of page 1, chec Form 122A-2.	cified k box	in the separ	ate instruct	12b. 13. ions	x 12  \$ 65,412.00  \$ 72,426.00
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the  Calculate the median family income that applies to  Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size  To find a list of applicable median income amounts, go for this form. This list may also be available at the bank  How do the lines compare?  14a. Line 12b is less than or equal to line 13. O  Go to Part 3. Do NOT fill out or file Official  14b. Line 12b is more than line 13. On the top of  Go to Part 3 and fill out Form 122A-2.	e form  you. Follow these steps:  GA  3  of household. online using the link spectruptcy clerk's office.  on the top of page 1, chec Form 122A-2.	cified k box	in the separ	ate instruct	12b. 13. ions	x 12  \$ 65,412.00  \$ 72,426.00
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the  Calculate the median family income that applies to  Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size  To find a list of applicable median income amounts, go for this form. This list may also be available at the bank  How do the lines compare?  14a. Line 12b is less than or equal to line 13. O  Go to Part 3. Do NOT fill out or file Official  14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	e form  you. Follow these steps:  GA  3 of household	cified k box	in the separ 1, <i>There is</i> esumption o	ate instruct no presum, f abuse is c	12b. 13. ions otion of abuse	x 12 \$ 65,412.00 \$ 72,426.00  Form 122A-2.
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the  Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. Line 12b is less than or equal to line 13. Of Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.  3: Sign Below  By signing here, I declare under penalty of perjury	e form  you. Follow these steps:  GA  3 of household	cified k box	in the separ 1, <i>There is</i> esumption o	ate instruct no presum, f abuse is c	12b. 13. ions otion of abuse	x 12 \$ 65,412.00 \$ 72,426.00  Form 122A-2.
13.	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the  Calculate the median family income that applies to  Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size  To find a list of applicable median income amounts, go for this form. This list may also be available at the bank  How do the lines compare?  14a. Line 12b is less than or equal to line 13. O  Go to Part 3. Do NOT fill out or file Official  14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.  3: Sign Below	e form  you. Follow these steps:  GA  3 of household	cified k box	in the separ 1, <i>There is</i> esumption o	ate instruct no presum, f abuse is c	12b. 13. ions otion of abuse	x 12 \$ 65,412.00 \$ 72,426.00  Form 122A-2.

Debtor

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Debtor 1	Destine Shavonne Robinson	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

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### United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

In re	Destine Shavonne Robinson		Case No.
		Debtor(s)	Chapter 7
Γhe ab		RIFICATION OF CREDITOR Notes that the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true and contains the attached list of creditors is true attached list of creditors is true attached list of creditors is true attached list of creditors at a contains the attached list of creditors at a contains	
Date:	February 25, 2020	/s/ Destine Shavonne Robinson	
Date.	1 001 001 y 20, 2020	Destine Shavonne Robinson	
		Signature of Debtor	

Aetna Life Insurance Company P.O. Box 981106 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cash Net USA 175 West Jackson Suite 1000 Chicago, IL 60604

Comenity Bank Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

I.c. System, Inc Attn: Bankruptcy Po Box 64378 St. Paul, MN 55164

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

Jefferson Capital Systems, LLC Attn: Bankruptcy 16 Mcleland Road Saint Cloud, MN 56303 John C. Martin Orthodontics 1728 GA-138 #130 Conyers, GA 30013

Lead Bank Attn: Bankruptcy 200 N 3rd St Garden City, MO 64747

Medical Data Systems (MDS) Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

Natiowide Recovery Service Attn: Bankruptcy Po Box 8005 Cleveland, TN 37320

Navient Attn: Bankruptcy Po Box 9640 Wilkes-Barre, PA 18773

NetCredit 175 West Jackson Boulevard Suite 1000 Chicago, IL 60604

Peachtree Dermatology Associates PC 371 E Paces Ferry Road Suite 900 Atlanta, GA 30305

Progressive Leasing 256 West Data Drive Draper, UT 84020

Synchrony Bank/Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Target Card Services P.O. Box 673 Minneapolis, MN 55440

University Hospital Attn: Bankruptcy 1350 Walton Way Agusta, GA 30901

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707

World Omni Financial Corporation Reg. Agent: C T Corporation System 289 S Culver Street Lawrenceville, GA 30046-4805

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	on
\$24	5 filing fee	
\$7	5 administrati	ve fee
+ \$1	5 trustee surc	charge
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

•

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.